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Typed or Printed name of person signing this certificate:

Karen Buzinski

Signature: Karen Buzinski

CUSTOMER NUMBER

24024

PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Hotton et al.)	Examiner:	P. Hirsch
App. Serial No.:	10/708,293)	Confirmation No.:	2292
Date Filed:	February 23, 2004)	Art Unit:	3753
For:	BALL VALVE SEAT SEAL)	Attorney Docket No.:	22188/06779

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Attached hereto is a Terminal Disclaimer to Obviate A Double Patenting Rejection and a Request for Recordation of Assignment. A check in the amount of \$170 is attached to cover the \$130 Terminal Disclaimer fee and the \$40 Recordation fee.

In response to the Office Action dated December 10, 2004, Applicants hereby submit the following amendments and remarks.

Please amend the application as follows:

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

101708293

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20	minus 20 =	* —
INDEPENDENT CLAIMS	2	minus 3 =	* —
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
			**	=	
Total	* 9	Minus	** 20	= —	
Independent	* 3	Minus	** 3	= —	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

3-14-05 L (Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
			**	=	
Total	* 11	Minus	** 20	= —	
Independent	* 4	Minus	*** 3	= 6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
			**	=	
Total	* 11	Minus	** 20	= —	
Independent	* 4	Minus	*** 3	= 6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

RATE	FEES
BASIC FEE	375.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEES
OR BASIC FEE	750.00
X\$18=	
X84=	
+280=	
TOTAL	770

SMALL ENTITY OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDI- TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

AMENDMENT B

3-14-05 L

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
			**	=	
Total	* 11	Minus	** 20	= —	
Independent	* 4	Minus	*** 3	= 6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDI- TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

AMENDMENT C

3-14-05 L

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
			**	=	
Total	* 11	Minus	** 20	= —	
Independent	* 4	Minus	*** 3	= 6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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